



Child Welfare Transition Policy Group

PREPARED FOR GOVERNOR-ELECT JON S. CORZINE

Final Report

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EXECUTIVE SUMMARY

The Child Welfare Transition Policy Group suggests that the Governor-Elect consider the following recommendations:

Immediately address urgent and serious problems on the field level. Service delivery on the field level must be improved to ensure the safety, permanency and well-being of children. Improving service delivery cannot be put on hold until a new structure is designed, or distracted by planning for a new department. Critical problems in the areas of screening of abuse and neglect allegations, training, adoption services, placement resources, behavioral health, medical services, support for foster parents, continuity of care, and functioning of the field offices (including the establishment of common protocols that are well communicated and understood) must be addressed. A more effective structure to deliver services at the local level must be developed and maintained while planning for restructuring is carried out. The group acknowledges the overall soundness of the reform plan, but the Governor may need to consider reevaluating and renegotiating a few key parts of the settlement agreement as part of these improvements.

Establish a planning process and strategy for restructuring the current design of child welfare services so that one entity with stature and autonomy is focused solely on children, youth and family issues. Acknowledging that restructuring alone will not ensure an effective and efficient system – strong leadership, management and accountability are also critical – the committee recommends that Governor-Elect Corzine commit to a process to ensure that the government have a structure to ensure a specific focus on children, youth and families, beginning with a careful planning process to develop the most effective, cost-efficient design and to address critical implementation issues.

Prioritize prevention. Prevention must be a priority. This requires the resources to ensure the development of long-term effective prevention efforts that strengthen children and families, including home visitation; the establishment of prevention intervention design and methodology criteria that set the standard for state funding and monitoring of effectiveness; and the development of a prevention infrastructure within the Department responsible for child welfare that will allow the building and dissemination of effective community specific prevention intervention efforts at all levels in all parts of the State of New Jersey.

Ensure a strong monitoring of the reform plan. Maintain a reconstituted monitoring entity and a separate entity for technical assistance.

Improve data collection, outcome benchmarks, overall accountability and fiscal accountability. Data collection, integrity, access, and analysis must all be improved to ensure a successful child welfare system. We recommend that steps are taken to ensure the collection of data, the integrity and accuracy of that data, and the ability of the government, advocates, and providers to access and analyze the data to inform policy and make managerial decisions. Existing sources of information – reports and other resources – should be incorporated into this process.

Develop a Family Policy for New Jersey. To truly improve child welfare in New Jersey, changes to the child welfare system must take place in the broader context of a social policy that aims to increase economic stability and wellness for all New Jersey families – addressing all of the vulnerable points for families such as housing, health care, and income. The child welfare system cannot be responsible for these areas, but will be greatly improved by a broader agenda that addresses them.

IMMEDIATELY ADDRESS URGENT AND SERIOUS PROBLEMS ON THE FIELD LEVEL

Immediate attention must be given to the following issues:

Screening and Protection. The current centralized screening structure uses poor methodology, lacks sufficient continuity in protocols and is generally not working due to an ongoing confusion over protocols.

Recommended Actions: The system needs clear guidelines and definitions regarding the practice model and local service system design. Utilize expertise to assist centralized screening to develop balanced, consistent protocols and response times. Work to empower area managers with consistent protocols, but also the flexibility to be thoughtful in responses.

Adoption Services. The Adoption Resource Centers were dismantled too quickly without an alternative system in place.

Recommended Actions: Consider implementing and supporting the revised adoption services plan developed by the Adoption Services Advisory Committee, which would maintain specialization on the local level. That plan would maintain adoption specialization in the local DYFS offices. In smaller offices, this would consist of at least one specialized adoption caseload. In larger offices, with more children in placement, this would be a full adoption unit. In addition, maintain a central adoption unit in Trenton to provide support to field operations and to handle statewide functions, such as home selection and the adoption registry.

Training. As a result of the reform there has been a dramatic increase in new personnel in all DYFS offices and a loss of skilled caseworkers who took early retirement resulting in a significant reduction of senior staff who are experienced in case work practice. Junior staff was frequently promoted to supervisory positions without adequate assessment of their skill level or supervisory capabilities. Replacing an experienced workforce becomes even more difficult when the training infrastructure does not exist. As a result, new hires were exposed to educational materials/training which was hastily put together, provided information that too frequently was outdated and not tailored to the needs of workers to meet the current case work practice demands. DYFS does not currently provide a professional work environment that mentors and supports professional development to make child welfare a career path worth pursuing resulting in frequent turnover of staff.

Recommended Actions: Ensure that the training staff have knowledge of best practices in child welfare, the ability to craft curriculum and the required educational objectives/evaluation tools and the ability to work collaboratively with content experts in New Jersey. The leadership of the child welfare training academy must craft a work plan that is well conceived and meet the educational needs of New Jersey's workforce by utilizing both expertise within the state and external consultants where in house expertise does not exist.

Behavioral Health. The current system is flawed, dysfunctional and fails to serve the children and families who most need the help. Child Behavioral Health should focus on children in DYFS and juvenile justice who most need it. Too many dollars are being spent on case management and not on clinical outpatient services and home based services that really work with this population.

Recommended Actions: Conduct a complete reassessment of the behavioral health system with an opportunity to revamp the system. The role of Value Options should be explored and revised or eliminated and replaced. Consider bringing the CMO work inside the Department, eliminating the youth case management services and bringing it inside. We should be leveraging more federal dollars for juvenile justice if more children were accurately diagnosed and provided mental health services.

Medical Services. When investigations of alleged child abuse are initiated there are inadequate resources to provide DYFS with timely and competent medical and mental health evaluations at the most critical stage in life of a case entering the child protection system. The infrastructure to provide critically important expertise to DYFS exists in the statutorily created statewide network of Regional Diagnostic and Treatment Centers (RDTC's). However, RDTC's have been inadequately funded to meet the needs of DYFS to substantiate allegations of abuse and provide highly specialized treatment. As a result, protocols for the Office of Medical Director to assure consistency in investigatory practice have not been implemented. Consequently, a small percentage of children who need services critical to protection are not receiving such.

Recommended Actions: Ensure a strong, empowered Office of the Medical Director. All services received by children should be under the Office of the Medical Director. That Office should be responsible for the coordination of medical and mental health services. There must be continuity of care – it is important, to the extent possible, to maintain a medical home for children going into foster care. Finally, we recommend ensuring that the RDTC's provide specialized services.

“Congregate Care:” The plan called for the dismantling of congregate care. The group disagrees with this notion and proposes that this point be renegotiated. The notion of the intimacy of a family setting is ideal, but the reality is that one formula does not fit all. The existing New Jersey reality is that the state started with insufficient resources and over utilization of detention and hospitals.

Recommended Actions: Consider renegotiating the settlement agreement to incorporate these realities. We need to send fewer kids out of state and have real options for outpatient home

based services so youth can come back to normal life in a foster or biological family. Shelters are necessary if judges are going to have solutions for status offenders. They should be a short term solution available in all counties. Shelter providers know adolescents well. They have always helped DYFS assess youth and return home or find an appropriate placement. They should be trained to help place more youth in foster home settings successfully.

Non-profit Partners. The State does not adequately reimburse non-profit providers so they can hire and retain well qualified staff.

Recommended Actions: Strengthen the ability of non-profit organizations to provide high quality services to children and families referred by or at risk of child welfare involvement by addressing salary issues.

Kinship Care. The reform plan has made an important commitment to ensure that children needing out-of-home placement remain with family members whenever possible. The increased support, through financial assistance and delivery of services, has made it possible for kinship families to step in to care for children at-risk. Kinship families must also be supported to ensure that the safety, well-being and permanency needs of their children are met. We have included a number of resources on kinship care in the appendix.

Recommended Actions: Maintain support, including financial support, for kinship families as a primary resource for children needing out-of-home placement. Ensure consistency in policy and services for kinship families across the state and support them to provide permanency for children. Fight against federal cuts to support for kinship care.

Support an Improved Structure on the Local Level. Area managers must be empowered, and have consistent protocols, but also the flexibility to be thoughtful in their responses.

Recommended Actions: Make immediate structural changes as outlined on pages 7 and 8.

DEVELOP A PROCESS FOR RESTRUCTURING THE DEPARTMENT RESPONSIBLE FOR CHILDREN, YOUTH AND FAMILIES

In the current system, children and families cannot access the services they need, frontline staff struggle with limited support, and state services are not as efficient or effective as they could be. Strong leadership and good management can make a big difference in solving these problems, but they are not enough.

Child and family services must be a stronger, more focused state priority. Currently housed in the Department of Human Services, the child welfare system competes with several other important service systems. It is only one aspect of human services when priorities are set for the state. Child and family services need an ongoing, visible, institutionalized voice at the highest level of government that will be a single accountable entity with the appropriate span of authority and responsibility. Child and family services need a stronger presence when policy and fiscal decisions are made.

Recommended Action: Enter a planning process to restructure the Department so it is focused on children, youth and families and can provide that presence. The new structure must be developed to maximize effective, respectful, and efficient service delivery. The planning process to design a new structure must take place outside the confines of the federal child welfare lawsuit against the state to the extent possible. While a commitment to a new structure can be an aspect of the settlement, the details of the planning and implementation must be under the direct and complete control of the Governor's Office. To be an effective entity, New Jersey must own this process.

Vision for Children, Youth and Families. The goal of the department that focuses on children, youth and families will be to ensure safety, permanency, and well-being for all children. The agency should have direct responsibility for child welfare and most other children's services, supported by strong inter-agency partnerships among other state departments also responsible for family services. A clear state policy to ensure security and stability for all children will provide the context for responsibility and accountability across all state departments. The state policy must include the vision that all children and families must be treated with kindness and respect.

In this newly constituted structure, child welfare services will be more broadly defined. The new department will continue to be responsible for the current continuum of services, including protection, services to strengthen at-risk families, out-of-home placement and permanency, adoption, behavioral health and services to ensure self-sufficiency for aging out youth. Responsibility of this new department will be expanded to include primary prevention, to ensure that all families are supported to succeed. Responsibility for youth in the juvenile justice system will also be part of this new structure, completing the continuum of services to the most at-risk youth.

The following are critical components of a restructured state-level entity:

- Strong policy and planning that is data-driven, grounded in evidenced-based models and establishes an integrated, consistent case practice model for implementation at the local level, with clearly articulated goals.
- Effective, strong management structure from Trenton to the local field offices, with local managers given the authority and flexibility, as well as accountability, to ensure implementation of an effective service delivery system.
- Support for the local field offices through appropriate case management, adequate training, clear expectations, effective supervision and sufficient services for children and families.
- Ongoing evaluation and quality assurance to ensure that the system is responsive to children and families, with accountability measured by outcomes, rather than process.

- Formal mechanisms to ensure that services for families are coordinated across state departments, with strong support from and accountability to Governor's Office to ensure that services are coordinated, accessible and maximize state resources.
- A process to get ongoing feedback from field staff, families and the community in reviewing and developing policy and practice.
- A strong fiscal plan that leverages federal dollars and uses resources efficiently.

Planning Process. We recommend that the Governor establish a focused, time-limited planning process by convening a task force or commission to develop options for a new structure, identify implementation steps and develop a strong fiscal plan. The strategic plan with goals and objectives should be completed by June 2006. Operational planning process to follow and be completed by December 2006. Phased-in implementation process to begin in January 2007, with ongoing review and assessment of implementation.

The restructured department should be created first as a planning office with no direct services or operational responsibility until critical implementation issues are identified and addressed. Once established, it should be comprised of core child welfare services and the Juvenile Justice Commission, with other aspects of the new department phased in over a longer period of time.

Critical questions to be addressed in the planning process:

- How to ensure effective linkages between the child welfare and public welfare systems, since there is significant overlap in the families served in each.
- How best to maintain the interest and commitment of the community in improving child welfare services while putting the current community planning process on hold until there is greater clarity on purpose and structure.
- How to ensure that there is inclusion or coordination of critical services in a new structure, such as Medicaid, Family care, maternal and child health programs, substance abuse and domestic violence services.
- How to foster better linkages to education, with specific supports for children served by the child welfare system.
- How to ensure that there is a focus on early care and education, with an effective, coordinated system of services for families with children from infancy to age 6.
- How to improve the effectiveness of the behavioral health system, especially for children who are dually-diagnosed.

In addition, immediate steps should be taken to improve the current structure of the Office of Children's Services (OCS) to strengthen service delivery on the local level:

- Consolidate the 5 divisions in OCS (DYFS, Behavioral Health, Prevention and Community Partnerships, Training and the new Division of Operations) into one division, renamed the Division of Children, Youth and Families. Continue it under the authority of the Department of Human Services, but with direct control over personnel and budget.
- This Division will be responsible for child welfare services. Its priority must be child protection, including both child abuse and neglect and family problems. It must also acknowledge the critical importance of prevention and have a structure that supports prevention.
- Make it responsible for integrating services more effectively at the state level to support local implementation, with the following functions:
 - Policy and planning
 - Program operations
 - Budget and fiscal issues
 - Contracting
 - Data collection, assessment and evaluation
- Services will be delivered on the local level through area offices, which will be headed by managers with the authority, responsibility and flexibility to implement an integrated case practice. They will also be responsible to engage the local community in assessing needs and developing services. (Note: some group members recommended re-establishing a regional office management structure between the state division and local offices. Agreement was not reached on this issue).

PRIORITIZE PREVENTION

A sound prevention program is family centered and community based; culturally sensitive and competent; engages families early (preferably prenatally), provides home visits, treats family participants as partners, empowers them by building on their strength and meets the developmental needs of the parents, children and families. These efforts must include the vision that every child must feel loved, supported, and able to experience the lightness of heart and joy that should be central to all childhoods.

Develop a prevention infrastructure that incorporates approaches that align the environmental (creating public will and support), systemic (operational capacity at state, county and local level) and individual (implementing best practices to scale) processes for effective execution. This will require that divisional operations at the state level have clearly defined roles and responsibilities that are fully staffed, trained and funded. Local collaborations must empower families with the tools to be full participants in the process, along with service providers and other community based organizations. These groups must be supported where they exist and created when there is a gap in coordinated efforts. To ensure optimization of both human and capital resources, programs must be implemented that meet the New Jersey Standards For

Prevention Through Family Support. **For more recommendations on prevention see Appendix Report One.**

Recommended Actions: Provide the resources to ensure the development and implementation of new and existing long-term effective prevention efforts that strengthen families and communities, including home visitation. Implement prevention programs that meet the New Jersey Standards for Prevention adopted by Family Support Americans and monitor their effectiveness. Develop a prevention infrastructure within the Department responsible for child welfare that will allow the building and dissemination of effective community-specific prevention and family support intervention efforts at all levels in all parts of the State of New Jersey

ENSURE A STRONG MONITORING ENTITY

It's very important that the state maintain control over the child welfare system. We strongly recommend a continued monitoring entity and a separate technical assistance entity.

Recommended Action: Consider either a single monitor with a technical assistance panel or task force, or a panel (perhaps with a reconstituted membership) to serve as monitor.

IMPROVE DATA AND ACCOUNTABILITY

Successful reform requires data-driven planning and data informed policy making. Emphasis must be placed on the integrity of data and effectively using benchmarks and reporting to improve the system.

Recommended Action: Recreate a new version of the Bureau of Research, Evaluation and Quality Assurance using up-to-date technology and methodologies to ensure high quality research and evaluation. In addition, where possible, use existing reports and resources. A lot of work has already been conducted on these issues. Don't reinvent the wheel. We have included a number of useful reports in the appendix.

DEVELOP A FAMILY POLICY FOR NEW JERSEY

The child welfare system will be more effective if it is accompanied by a family policy for the state that focuses on the well-being, safety, economic security, and health of all families.

Recommended Actions: We recommend considering the following –

- Adopt a formal Bill of Rights for all New Jersey children, based on the UNICEF Convention and modified for our state. New Jersey already has an out of home placement Bill of Rights (attached) enacted in 1992 that could be used as a basis for the broader Bill of Rights.
- Pursue a formal population-based Family Success Initiative that would define a vision, elements, and standards for family-friendly policies, practices, and services across state

government and within the communities of our state. This initiative would move from a framework of reacting to and preventing bad things from happening to one of helping children fulfill their rights and helping families successfully rear their children. The old paradigm is reaction to and prevention of bad things. The new paradigm should be promotion of family economic and social success new paradigm.

- Develop a Governor's initiative to confront the social and economic impact of childhood poverty, social and economic injustice, and the growing disparity between the haves and the have-nots in our state. This would be an initiative from the Governor's office and would involve a series of gatherings of business leaders, leaders from the faith community, grassroots organizations, organized labor, advocacy groups, elected and appointed officials, etc. The process would surface and quantify the economic and social costs and opportunity loss and establish a broad-based and long term action agenda to take on a series of issues that political leaders here-to-fore have avoided because they seem so big and scary. The involvement of the mainstream community (NJBIA, EDA, Chambers of Commerce, employers, business and corporate leadership, etc.) would be critical to such an undertaking.
- Re-constitute a new Governor's Cabinet for Children that is re-charged and managed properly. With leadership and commitment from the Governor's Office, it could and should be the forum and method for carrying out broad-based initiatives and resolving important issues.

Report respectfully submitted by:

Reverend Darrell Armstrong, Co-Chair
Pastor, Shiloh Baptist Church, Trenton

Robert L. Johnson, MD, FAAP, Co-Chair
The Sharon and Joseph L. Muscarelle Endowed Dean (Interim) UMDNJ - New Jersey Medical School

Cecilia Zalkind, Co-Chair
Executive Director, Association for Children of New Jersey

Jan Bidwell
Social Worker; Children's Rights Advocate

Tom Blatner
President, Janus Solutions

Angela Estes, M.Ed.
Executive Director, Robins' Nest

Martin A. Finkel, D.O., FAAP
Co-Director, New Jersey Child Abuse Research Education & Service Institute, UMDNJ-SOM

Carlos Hendricks
Executive Director, Lawrenceville Neighborhood Family Center

Carla Katz
President, CWA Local 1034

Craig Levine
Senior Counsel and Policy Director, New Jersey Institute for Social Justice

Bernice Manshel
Retired, Juvenile Justice Commission, Former Director of DYFS

Richard O'Grady
Executive Director, New Jersey Association of Children's Residential Facilities

Donna Pressma
President, Children's Home Society

Rebecca Purchase
President/CEO, United Way of Salem County

Jim Ragan
Foster Parent; Vice President, Bank of New York Mortgage Company

Hetty Rosenstein
President, CWA Local 1037

Janet Rosenzweig, Ph.D.
Executive Director, Prevent Child Abuse - NJ

Nancy Erika Smith
Civil Rights Attorney, Wynona's House, a Child Advocacy Center

Maria Vizcarrondo
President/CEO of United Way of Essex/Hudson; President of the United Ways of New Jersey, Inc.

Appendix. (Available Upon Request)

1. Child Welfare Policy Group Prevention Subcommittee Full Report.
2. American Academy of Pediatrics Bright Futures Document, Georgetown University Medical School
3. “Success by 6,” United Way of Essex and West Hudson
4. Bridges to Success, United Way of Essex and West Hudson
5. Home Visiting Programs as a Family Support Strategy
6. Staffing Oversight Review Body (S. O. R. P.)
7. NJ Task Force on Child Abuse and Neglect
8. Partnership for Children => Children SOC – Children’s Initiatives
9. Adverse Childhood Experiences Study
10. ACNJ Voices Report
11. Joint Report on JJC and the Task force
12. Kinship Care Resources: Kinship Care Resource Center, Lansing, MI, (<http://www.kinshipcare.net/index.html>); Foster and Kinship Care Education, El Dorado County, CA, (<http://www.fkce.net/>); Florida Kinship Care Network (<http://www.flkin.usf.edu/pages/index.asp>); U. S. Congressional Report (06/2000) (<http://aspe.hhs.gov/hsp/kinr2c00/>) CWLA Kinship Care Fact Sheet (<http://www.cwla.org/programs/kinship/factsheet.htm>); Urban Institute Kinship Care Fact Sheet (<http://www.urban.org/UploadedPDF/900661.pdf>); (<http://www.urban.org/anf>); Joseph Rowntree Foundation (<http://www.jrf.org.uk/knowledge/findings/socialpolicy/d11.asp>); Welfare Information Network (<http://www.financeproject.org/Publications/kinshipcareresource.htm>)